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In re the Application of Peter Andersen et al) Group Art Unit: 1614
•) Examiner:
Appln. No. 10/617,038) Confirmation No. 5215
Filed: July 11, 2003)
For: THERAPEUTIC TB VACCINE)) January 6, 2004

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TRANSMITTAL OF CERTIFIED COPY

Sirs:

Attached please find the certified copy of the foreign application from which priority is claimed in the above-identified U.S. Patent application:

Country:

Denmark

Application No.

PA 2000 00666

Filing Date:

April 19, 2000

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Title: Nucleic acid fragments and polypeptide fragments derived from M. Tuberculosis.

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This is to certify that the attached documents are exact copies of the above mentioned patent application as originally filed.



Patent- og Varemærkestyrelsen

Økonomi- og Erhvervsministeriet

26 November 2003

PATENT- G VAREMÆRKESTYRELSEN

PVS

Nucleic acid fragments and polypeptide fragments derived from M. Tuberculosis

FIELD OF THE INVENTION

The present invention relates to immunologically active, polypeptide fragments derived from the *Mycobacterium tuberculosis*, vaccines and other immunologic compositions containing the fragments as immunogenic components, and methods of production and use of the polypeptides. The invention also relates to novel nucleic acid fragments derived from *M. tuberculosis* which are useful in the preparation of the polypeptide fragments of the invention or in the diagnosis of infection with *M. tuberculosis*.

10

Background of the invention

Human tuberculosis (hereinafter designated "TB") caused by *Mycobacterium tuberculosis* is a severe global health problem responsible for approximately 3 million deaths annually, according to the WHO. The worldwide incidence of new TB cases has been progressively falling for the last decade but the recent years has markedly changed this trend due to the advent of AIDS and the appearance of multidrug resistant strains of *M. tuberculosis*.

The only vaccine presently available for clinical use is BCG, a vaccine which efficacy remains a matter of controversy. BCG generally induces a high level of acquired resistance in animal models of TB, but several human trials in developing countries have failed to demonstrate significant protection. Notably, BCG is not approved by the FDA for use in the United States. Although the BCG vaccine is widely used, some countries including the USA never introduced it for use in general population vaccination programmes, one reason being that vaccination with BCG interferes with the use of tuberculin skin testings for diagnosing tuberculosis and for use in population surveys.

This makes the development of a new and improved vaccine against TB an urgent matter which has been given a very high priority by the WHO.

30 It is an object of the invention to provide novel antigens which are effective as components in a subunit vaccine against TB or which are useful as components in diagnostic compositions for the detection of infection with mycobacteria, especially

virulence-associated mycobacteria. The novel antigens may also be important drug targets.

Summary of the invention

Name of antigen	Nucleotide sequence SEQ ID NO:	Amino acid sequence SEQ ID NO:
Rv0284	1	2
Rv0284 3' part / c-terminal	3	4
Rv0285	5	6
Rv3878 (ORF11)	7	8

5

Detailed disclosure of the invention

The present invention is i.a. based on the identification and characterisation of a number of previously uncharacterised antigens from M. tuberculosis as presented in the examples. It is well-known in the art that T-cell epitopes are responsible for the elicitation of the acquired immunity against TB. Since such T-cell epitopes are linear and are known to have a minimum length of 6 amino acid residues, the present invention is especially concerned with the identification and utilisation of such T-cell epitopes.

15 As illustrated in example 2, Rv0284 (SEQ ID NO: 2) causes a marked release of IFN-γ from PBMC withdrawn from TB patients from half of the donors, and in a majority of PPD positive healthy donors without any increase in PPD negative healthy donors. Rv0284 further stimulates T cell lines from PPD positive donors to release IFN-γ and induces a DTH reaction in guinea pigs aerosol infected with M. tuberculosis. This indicates that 20 Rv0284 is highly biologically active and recognised by PPD positive donors and TB patients.

Thus, one aspect of the invention relates to a substantially pure polypeptide fragment which comprises an amino acid sequence as shown in SEQ ID NO: 2 or comprises an amino acid sequence analogue having a sequence identity with the polypeptide fragment shown in SEQ ID NO: 2 of at least 70% and at the same time being immunologically equivalent to the polypeptide fragment shown in SEQ ID NO: 2

A related aspect of the invention relates to a substantially pure polypeptide fragment which comprises a T-cell epitope of the amino acid sequence as shown in SEQ ID NO: 2 and at the same time being immunologically equivalent to the polypeptide shown in SEQ ID NO: 2.

As illustrated in example 2, Rv0285 (SEQ ID NO: 6) stimulates T cell lines from PPD positive donors to release IFN-γ to a level of close to the release caused by PPD. .

Rv0285 further induces a DTH reaction in guinea pigs aerosol infected with M.

10 tuberculosis. This indicates that Rv0285 is highly biologically active and recognised by PPD positive donors and TB patients.

As illustrated in example 2, Rv3878 (SEQ ID NO: 8) causes a marked release of IFN-γ from PBMC withdrawn from TB patients and in PPD positive healthy donors without any increase in PPD negative healthy donors. Rv3878 further stimulates T cell lines from PPD positive donors to release IFN-γ to a level resembling the release caused by PPD and Rv0285 also induces a DTH reaction in guinea pigs aerosol infected with M. tuberculosis.. This indicates that Rv3878 is highly biologically active and recognised by PPD positive donors and TB patients.

20

A polypeptide fragment is considered to be "immunologically equivalent" to a polypeptide disclosed in the present invention, if it

- induces in vitro recall response determined by release of IFN-γ of at least 30% of the release induced by the polypeptide disclosed from Peripheral Blood Mononuclear Cells (PBMC) or whole blood withdrawn from TB patients 0-6 months after diagnosis, or PPD positive individual, the inductions being performed by the addition of the polypeptide disclosed and the polypeptide fragment to two individual suspensions comprising about 1.0 to 2.5 x 10⁵ PBMC or whole blood cells, the addition of the polypeptides resulting in a concentration of not more than 20 μg per ml suspension, the release of IFN-γ being assessable by determination of IFN-γ in supernatant harvested 5 days after the addition of the polypeptide to the suspension; or
- 2) it induces a positive DTH response determined by intradermal injections or local application patchs of at most 100 µg of the polypeptide disclosed and of the polypeptide
 35 fragment to an individual who is clinically or subclinically infected with a virulent Mycobacterium, and the polypeptide fragment causing a response diameter that is at least

50% of that caused by the polypeptide disclosed measured 72-96 hours after the injections or applications.

5 Each polypeptide disclosed in the present application is characterised by specific amino acid and nucleic acid sequences. It will be understood that such sequences include analogues and variants produced by recombinant methods wherein such nucleic acid and polypeptide sequences have been modified by substitution, insertion, addition and/or deletion of one or more nucleotides in said nucleic acid sequences to cause the substitution, insertion, addition or deletion of one or more amino acid residues in the recombinant polypeptide.

In both immunodiagnostics and vaccine preparation, it is often possible and practical to prepare antigens from segments of a known immunogenic protein or polypeptide. Certain epitopic regions may be used to produce responses similar to those produced by the entire antigenic polypeptide. Potential antigenic or immunogenic regions may be identified by any of a number of approaches, e.g., Jameson-Wolf or Kyte-Doolittle antigenicity analyses or Hopp and Woods (1981) hydrophobicity analysis (see, e.g., Jameson and Wolf, 1988; Kyte and Doolittle, 1982; or U.S. Patent No. 4,554,101). Hydrophobicity analysis assigns average hydrophilicity values to each amino acid residue from these values average hydrophilicities can be calculated and regions of greatest hydrophilicity determined. Using one or more of these methods, regions of predicted antigenicity may be derived from the amino acid sequence assigned to the polypeptides of the invention.

Alternatively, in order to identify relevant T-cell epitopes which are recognized during an immune response, it is also possible to use a "brute force" method: Since T-cell epitopes are linear, deletion mutants of polypeptides having SEQ ID NO: 2, 4, 6, or 8 will, if constructed systematically, reveal what regions of the polypeptides are essential in immune recognition, e.g. by subjecting these deletion mutants to the IFN-γ assay described herein.
Another method utilises overlapping oligomers (preferably synthetic having a length of e.g. 20 amino acid residues) derived from polypeptides having SEQ ID NO: 2, 4, 6, or 8.
Some of these will give a positive response in the IFN-γ assay whereas others will not.

In a preferred embodiment of the invention, the polypeptide fragment of the invention comprises an epitope for a T-helper cell.

Although the minimum length of a T-cell epitope has been shown to be at least 6 amino acids, it is normal that such epitopes are constituted of longer stretches of amino acids. Hence it is preferred that the polypeptide fragment of the invention has a length of at least 7 amino acid residues, such as at least 8, at least 9, at least 10, at least 12, at least 14, at least 16, at least 18, at least 20, at least 22, at least 24, and at least 30 amino acid residues.

By producing fusion polypeptides, superior characteristics of the polypeptide fragments of 10 the invention can be achieved. For instance, fusion partners which facilitate export of the polypeptide when produced recombinantly, fusion partners which facilitate purification of the polypeptide, and fusion partners which enhance the immunogenicity of the polypeptide fragment of the invention are all interesting possibilities. Therefore, the invention also pertains to a fusion polypeptide comprising at least one polypeptide 15 fragment defined above and at least one fusion partner. The fusion partner can, in order to enhance immunogenicity, e.g. be selected from the group consisting of another polypeptide fragment as defined above (so as to allow for multiple expression of relevant epitopes), and an other polypeptide derived from a bacterium belonging to the tuberculosis complex, such as ESAT-6, MPB64, MPT64, and MPB59 or at least one T-cell 20 epitope of any of these antigens. Other immunogenicity enhancing polypeptides which could serve as fusion partners are T-cell epitopes (e.g. derived from the polypeptides ESAT-6, MPB64, MPT64, or MPB59) or other immunogenic epitopes enhancing the immunogenicity of the target gene product, e.g. lymphokines such as INF-y, IL-2 and IL-12. In order to facilitate expression and/or purification the fusion partner can e.g. be a 25 bacterial fimbrial protein, e.g. the pilus components pilin and papA; protein A; the ZZpeptide (ZZ-fusions are marketed by Pharmacia in Sweden); the maltose binding protein; gluthatione S-transferase; β-galactosidase; or poly-histidine.

Other interesting fusion partners are polypeptides which are lipidated and thereby effect that the immunogenic polypeptide is presented in a suitable manner to the immune system. This effect is e.g. known from vaccines based on the Borrelia burgdorferi OspA polypeptide, wherein the lipidated membrane anchor in the polypeptide confers a self-adjuvating effect to the polypeptide (which is natively lipidated) when isolated from cells producing it. In contrast, the OspA polypeptide is relatively silent immunologically when prepared without the lipidation anchor.

A substantially pure polypeptide according to any of the preceding clams for use as a pharmaceutical.

Use of a substantially pure polypeptide according to any of the preceding claims for the preparation of a pharmaceutical composition for the diagnosis of tuberculosis caused by *Mycobacterium tuberculosis*, *Mycobacterium africanum* or *Mycobacterium bovis*.

Use of a substantially pure polypeptide according to any of the preceding claims for the preparation of a pharmaceutical composition for the vaccination against infections caused by Mycobacterium tuberculosis, Mycobacterium africanum or Mycobacterium bovis.

Another part of the invention pertains to an immunologic composition comprising a polypeptide or fusion polypeptide according to the invention. In order to ensure optimum performance of such an immunologic composition it is preferred that it comprises an immunologically and pharmaceutically acceptable carrier, vehicle or adjuvant.

Suitable carriers are selected from the group consisting of a polymer to which the polypeptide(s) is/are bound by hydrophobic non-covalent interaction, such as a plastic, e.g. polystyrene, or a polymer to which the polypeptide(s) is/are covalently bound, such as a polysaccharide, or a polypeptide, e.g. bovine serum albumin, or keyhole limpet haemocyanin. Suitable vehicles are selected from the group consisting of a diluent and a suspending agent. The adjuvant is preferably selected from the group consisting of dimethyldioctadecylammonium bromide (DDA), Quil A, poly I:C, Freund's incomplete adjuvant, IFN-γ, IL-2, IL-12, monophosphoryl lipid A (MPL), and muramyl dipeptide (MDP).

25

A preferred immunologic composition according to the present invention comprising at least two different polypeptide fragments, each different polypeptide fragment being a polypeptide or a fusion polypeptide defined above. It is preferred that the immunologic composition comprises between 3-20 different polypeptide fragments or fusion polypeptides.

Such an immunologic composition may preferably be in the form of a vaccine or in the form of a skin test reagent.

In line with the above, the invention therefore also pertain to a method for producing an immunologic composition according to the invention, the method comprising preparing, synthesizing or isolating a polypeptide according to the invention, and solubilizing or dispersing the polypeptide in a medium for a vaccine, and optionally adding other M. tuberculosis antigens and/or a carrier, vehicle and/or adjuvant substance.

Each of the polypeptides may be characterised by specific amino acid and nucleic acid sequences. It will be understood that such sequences include analogues and variants produced by recombinant methods wherein such nucleic acid and polypeptide sequences have been modified by substitution, insertion, addition and/or deletion of one or more nucleotides in said nucleic acid sequences to cause the substitution, insertion, addition or deletion of one or more amino acid residues in the recombinant polypeptide. A preferred nucleotide sequence encoding a polypeptide of the invention is a nucleotide sequence which

15

- is a DNA sequence selected from the group consisting of SEQ ID NOs: 1, 3, 5, and 7 or an analogue of said sequence which hybridises with any DNA sequence complementary to DNA sequences shown in SEQ ID NOs: 1, 3, 5, or 7 or a specific part thereof, preferably under stringent hybridisation conditions. By stringent conditions is understood,
 as defined in the art, 5-10°C under the melting point T_m, cf. Sambrook et al, 1989, pages 11.45-11.49, and/or
- 2) encodes a polypeptide, the amino acid sequence of which has a 80% sequence identity with an amino acid sequence selected from the group consisting of SEQ ID NOs: 2, 4, 6,
 25 and 8 and/or
 - 3) constitutes a subsequence of any of the above mentioned DNA sequences, and/or
 - 4) constitutes a subsequence of any of the above mentioned polypeptide sequences.

30

The terms "analogue" or "subsequence" when used in connection with the DNA fragments of the invention are thus intended to indicate a nucleotide sequence which encodes a polypeptide exhibiting identical or substantially identical immunological properties to a polypeptide encoded by the DNA fragment of the invention shown in any of SEQ ID NOs:

35 1, 3, 5, or 7, allowing for minor variations which do not have an adverse effect on the

ligand binding properties and/or biological function and/or immunogenicity as compared to any of the polypeptides of the invention or which give interesting and useful novel binding properties or biological functions and immunogenicities etc. of the analogue and/or subsequence. The analogous DNA fragment or DNA sequence may be derived from a bacterium, a mammal, or a human or may be partially or completely of synthetic origin. The analogue and/or subsequence may also be derived through the use of recombinant DNA techniques.

Furthermore, the terms "analogue" and "subsequence" are intended to allow for variations

10 in the sequence such as substitution, insertion (including introns), addition, deletion and rearrangement of one or more nucleotides, which variations do not have any substantial effect on the polypeptide encoded by a DNA fragment or a subsequence thereof. The term "substitution" is intended to mean the replacement of one or more nucleotides in the full nucleotide sequence with one or more different nucleotides, "addition" is understood to mean the addition of one or more nucleotides at either end of the full nucleotide sequence, "insertion" is intended to mean the introduction of one or more nucleotides within the full nucleotide sequence, "deletion" is intended to indicate that one or more nucleotides have been deleted from the full nucleotide sequence whether at either end of the sequence or at any suitable point within it, and "rearrangement" is intended to mean that two or more nucleotide residues have been exchanged with each other.

It is well known that the same amino acid may be encoded by various codons, the codon usage being related, *inter alia*, to the preference of the organisms in question expressing the nucleotide sequence. Thus, at least one nucleotide or codon of a DNA fragment of the invention may be exchanged by others which, when expressed, result in a polypeptide identical or substantially identical to the polypeptide encoded by the DNA fragment in question.

When the term nucleic acid is used in the following, it should be understood that for the number of purposes where nucleic acid can be substituted with DNA or RNA, which will be apparent for the person skilled in the art. For the purposes of hybridization, PNA or LNA may be used instead of DNA or nucleic acid. As DNA is the most frequently used transfection material DNA is the preferred nucleic acid.

The invention also relates to a replicable expression vector which comprises a nucleic acid fragment defined above, especially a vector which comprises a nucleic acid fragment encoding a polypeptide fragment of the invention.

The vector may be any vector which may conveniently be subjected to recombinant DNA procedures, and the choice of vector will often depend on the host cell into which it is to be introduced. Thus, the vector may be an autonomously replicating vector, i.e. a vector which exists as an extrachromosomal entity, the replication of which is independent of chromosomal replication; examples of such a vector are a plasmid, phage, cosmid, minithromosome or virus. Alternatively, the vector may be one which, when introduced in a host cell, is integrated in the host cell genome and replicated together with the chromosome(s) into which it has been integrated.

Expression vectors may be constructed to include any of the DNA segments disclosed herein. Such DNA might encode an antigenic protein specific for virulent strains of mycobacteria or even hybridization probes for detecting mycobacteria nucleic acids in samples. Longer or shorter DNA segments could be used, depending on the antigenic protein desired. Epitopic regions of the proteins expressed or encoded by the disclosed DNA could be included as relatively short segments of DNA. A wide variety of expression vectors is possible including, for example, DNA segments encoding reporter gene products useful for identification of heterologous gene products and/or resistance genes such as antibiotic resistance genes which may be useful in identifying transformed cells.

The vector of the invention may be used to transform cells so as to allow propagation of
the nucleic acid fragments of the invention or so as to allow expression of the polypeptide
fragments of the invention. Hence, the invention also pertains to a transformed cell
harbouring at least one such vector according to the invention, said cell being one which
does not natively harbour the vector and/or the nucleic acid fragment of the invention
contained therein. Such a transformed cell (which is also a part of the invention) may be
any suitable bacterial host cell or any other type of cell such as a unicellular eukaryotic
organism, a fungus or yeast, or a cell derived from a multicellular organism, e.g. an animal
or a plant. It is especially in cases where glycosylation is desired that a mammalian cell is
used, although glycosylation of proteins is a rare event in prokaryotes. Normally, however,
a prokaryotic cell is preferred such as a bacterium belonging to the ginera Mycobacterium, Salmonella, Pseudomonas, Bacillus and Eschericia. It is preferred that the

transformed cell is an E. coli, B. subtilis, or M. bovis BCG cell, and it is especially preferred that the transformed cell expresses a polypeptide according of the invention. The latter opens for the possibility to produce the polypeptide of the invention by simply recovering it from the culture containing the transformed cell. In the most preferred embodiment of this part of the invention the transformed cell is Mycobacterium bovis BCG strain: Danish 1331, which is the Mycobacterium bovis strain Copenhagen from the Copenhagen BCG Laboratory, Statens Seruminstitut, Denmark.

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Example

Example 1: Cloning and expression of Rv0284, Rv0285 and Rv3878

The coding region of Rv0285, Rv3878 and the 3'-part (380 bp) of Rv0284 were amplified by PCR using following primer sets:

5 Rv0284-F: CTG <u>AGA TCT</u> CAG GTA CCG GAT TCG CCG

Bglll

Rv0284-R: CTC CCA TGG TCA TGA CTG ACT CCC CTT

Ncol

10

Rv0285-F: CTG <u>AGA TCT</u> ATG ACG TTG CGA GTG GTT Bg/II

Rv0285-R: CTC <u>CCA TGG</u> TCA GCC GCC CAC GAC CCC

15 Ncol

Rv3878-F: CTG <u>AGA TCT</u> GCT ACT GTT AAC AGA TCG

Bg/II

20 Rv3878-R: CCG CTC GAG CTA CAA CGT TGT GGT TGT Xhol

PCR reactions contained 10 ng of M. tuberculosis H37Rv DNA in 1x low salt Taq⁺ buffer from Stratagene supplemented with 250 mM of each of the four nucleotides (Boehringer 25 Mannheim), 0.5 mg/ml BSA (IgG technology), 1% DMSO (Merck), 5 pmoles of each primer and 0.5 unit Taq⁺ DNA polymerase (Stratagene) in 10 μl reaction volume. Reactions were initially heated to 94°C for 15 sec, followed by 30 cycles of 94°C for 30 sec, 55°C for 30 sec and 72°C for 90 sec, and finally by 72°C for 5 min. The PCR fragments were cloned into the TA cloning vector pCR2.1 (Invitrogen) and then 30 transferred to the pMCT3 expression vector at the restriction sites indicated by the primers above. The resulted recombinant antigens carried 6-histidine residues at the N-terminal. All clones were confirmed by DNA sequencing.

To express his-tagged recombinant antigens, 100 ml of an overnight culture of XL-1 blue carrying the pMCT3 construct was added to 900 ml of LB-media containing 100 μ g/ml

ampicillin, grown at 37°C with shaking. 1 mM IPTG was added at OD600 =0.4-0.6 and the culture was incubated for additional 3 - 16 hours before harvesting of cells. For purification, the cell pellet was resuspended in 20 ml of Sonication buffer (20 mM Tris-Cl, pH 8.0, 0.5 M NaCl, 10% Glycerol, 5 mM β-ME, 0.01% Tween 20 and 1 mM imidazole). Cells were lysed and DNA was digested by treating with lysozyme (0.1 mg/ml) and DNase I (2.5 μg/ml) at room temperature for 20 min with gentle agitation. The recombinant protein was bring to solution by adding 80 ml of Sonication Buffer containing 8 M urea and sonicated the sample 5 x 30 sec, with 30 sec pausing between the pulses.

10 After centrifugation, the lysate was applied to a 5 ml TALON column (Clonetech). The column was then washed with 25 ml of urea containing Sonication buffer, and the bound protein was eluted by imidazole steps (5, 10, 20, 40 and 100 mM) in the same buffer. The fractions were analyzed by silver stained SDS-PAGE, and recombinant protein containing fractions were pooled and dialyzed against 3 x 1 L of 10 mM Tris-Cl (pH 8.0), 0.15 M NaCl and 0.1% SDS. Two mg of TALON purified recombinant antigen was subjected to SDS-PAGE on an 16 x 16 cm gel. After separation, the recombinant antigen band was cut out and the protein was eluted by an Model 422 Electro-Eluter (Bio-Rad). SDS was removed from eluted protein by Chloroform/Methanol extraction.

20 Example 2: Biological activity of the recombinant antigens.

The purified recombinant proteins were screened for the ability to induce a T cell response measured as IFN-γ release. A preliminary screening involved testing of the IFN-γ induction of T cell lines generated from PPD positive donors. This test was followed by measuring the response in PBMC preparations obtained from TB patients, PPD positive as well as negative healthy donors.

Interferon-y induction of T cell lines

Human donors: PBMC were obtained from healthy donors with a positive *in vitro* response to PPD.

T cell line preparation: T cell lines were prepared by culturing 5 x 10⁶ freshly isolated PBMC/ml with viable *M. tuberculosis* at a ratio of 5 bacteria per macrophage in a total volume of 1 ml. The cells were cultured in RPMI 1640 medium (Gibco, Grand Island, N.Y) supplemented with HEPES, and 10% heat-inactivated NHS. After 7 days in culture at 37 °C and 5% CO₂, T cells were supplemented with 50 U/ml of r-IL-2 (Boehringer Mannheim)

for approximately 7 days. Finally, the T cell lines were tested for reactivity against the recombinant antigens by stimulating 1-5 x 10⁵ cells/ml with 5 μg/ml of PPD, 3 μg/ml of rRv0284ct, 5 μg/ml of rRv0285, or 2.5 μg/ml of rRv3878 in the presence of 5 x 10⁵ autologous antigen-presenting cells/ml. No antigen (No ag) and PHA were used as negative and positive controls, respectively. The supernatants were harvested after 4 days of culture and stored at -80 °C until the presence of IFN-γ were analysed.

Cytokine analysis: Interferon-γ (IFN-γ) was detected with a standard sandwich ELISA technique using a commercially available pair of monoclonal antibodies (Endogen, MA, US) and used according to the manufacturer's instruction. Recombinant IFN-γ (Endogen, MA, US) was used as a standard. All data are means of duplicate wells and the variation between the wells did not exceed 10 % of the mean. Responses obtained with two different T cell lines are shown in Table 1.

15 As shown in Table 1, high levels of IFN-γ release are observed after stimulation with the recombinant antigens ranging from 33% (rRv0284ct) to 83% (rRv3878) of the response seen after stimulation with PPD.

Table 1. Stimulation of two T cell lines with recombinant rRv0284ct, rRv0285, and rRv3878. Responses to PHA and PPD are shown for comparison. Results are presented as pg IFN-y/ml.

T cell line

Donor	No ag	PHA (1 μg/ml)	PPD (5 μg/ml)	rRv0284ct (3 μg/ml)	rRv0285 (5 μg/ml)	rRv3878 (2.5 μg/ml)
1	50	2975	2742	914	2019	1072
2	50	1482	803	352	548	667

25 Interferon-γ release from PBMC isolated from human TB patients and PPD positive and negative healthy donors

Human donors: PBMC were obtained from healthy donors with a positive *in vitro* response to purified protein derivative (PPD) or healthy donors with a negative *in vitro* response to PPD. PBMC were also obtained from TB patients with microscopy or culture proven infection. Blood samples were drawn from TB patients 0-6 months after diagnosis.

Lymphocyt preparations and cell culture: PBMC were freshly isolated by gradient centrifugation of heparinized blood on Lymphoprep (Nycomed, Oslo, Norway) and stored

in liquid nitrogen until use. The cells were resuspended in complete RPMI 1640 medium (Gibco BRL, Life T chnologies) supplemented with 1% penicillin/str ptomycin (Gibco BRL, Life Technologies), 1% non-essential-amino acids (FLOW, ICN Biomedicals, CA, USA), and 10% heat-inactivated normal human AB serum (NHS). The viability and number of the cells were determined by Nigrosin staining. Cell cultures were established with 1.25 x 10⁵ PBMCs in 100 μl in microtitre plates (Nunc, Roskilde, Denmark) and stimulated with 5 μg/ml PPD or rRv0284ct and rRv3878 in a final concentration of 2.5 and 5 μg/ml, respectively. No ag was used as a negative control, whereas phytohaemagglutinin (PHA) was used as a positive control. Moreover, the response to a well-known T cell antigen, ESAT-6, was included for comparison. Supernatants for the analysis of secreted cytokines were harvested after 5 days of culture, pooled, and stored at -80 °C until use.

Cytokine analysis: IFN-γ was detected as above. Responses obtained with PBMCs from 15 14 individual donors are shown in Table 2.

As shown in Table 2, stimulation of PBMC from TB patients as well as PPD positive donors with both rRv0284ct and rRv3878 resulted in a marked release of IFN-γ with 55% of the donors recognising the recombinant antigens at a level of more than 500 pg/ml. As expected, none of the recombinant antigens gave rise to IFN-γ release in PPD negative donors.

Table 2. Stimulation of PBMCs from 4 TB patients, 7 PPD positive healthy donors, and 3 PPD negative healthy donors with recombinant antigen. Responses to PHA, PPD, and ESAT-6 are shown for comparison. Results are given as pg IFN-γ/ml.

5 TB patients

Donor	No ag	PHA (1 μg/ml)	PPD (5 μg/ml)	ESAT-6 (5 μg/ml)	rRv0284ct (2.5 μg/ml)	rRv3878 (5 μg/ml)
1	3	4541	4074	2154	809	3
2	92	3408	4891	611	236	2029
3	5	5282	4647	2827	308	149
4	10	4531	2077	38	140	287

PPD positive healthy donors

Donor	No ag	PHA (1 μg/ml)	PPD (5 µg/ml)	ESAT-6 (5 μg/ml)	rRv0284ct (2.5 μg/ml)	rRv3878 (5 μg/ml)
1	74	5413	3339	0	382	77
2	14	5614	3852	198	1324 ⁻	633
3	7	6165	5808	4	2951	2732
4	63	6532	6314	1567	3009	3482
5	43	4733	6195	1272	5166	2589
6	5	3809	2582	15	5	71
7	31	6716	2275	424	1449	832

PPD negative healthy donors

Donor	No ag	PHA	PPD	ESAT-6	rRv0284ct	rRV3878
		(1 μg/ml)	(5 μg/ml)	(5 μ g /ml)	(2.5 μg/ml)	(5 μg/ml)
1	0	3354	113	0	269	17
2	0	3803	563	0	22	0
3	0	3446	525	10	203	34

10

Together these analyses using T cell lines and PBMC, respectively, indicate that rRv0284ct, rRv0285, and rRv3878 are highly biologically active and recognised by PPD positive donors and TB patients.

15

Skin test reaction in TB infected guinea pigs

The skin test reactivity of the recombinant antigens was tested in *M. tuberculosis* infected guinea pigs. A group of 5 female outbreed guinea pigs of the Dunkin Hartley strain (Møllegaard Breeding and Research Center A/S, Lille Skensved, Denmark) were infected by the aerosol route in an exposure chamber of a Glas-Col® Inhalation Exposure System, which was calibrated to deliver approximately 20-25 *M. tuberculosis* Erdman bacilli into the lungs of each animal. As a control, the skin test reactivity of uninfected guinea pigs

was tested. Skin tests were performed 28 days after infection with injection of 5 μg of rRv0284ct, rRv0285, or rRv3878. As a positive control, the guinea pigs were sensitised with 10 tuberculin units (TU) of PPD (1TU = 0.02 μg) whereas injection of phosphate-buffered saline (PBS) was used as a negative control. Skin test responses (diameter of erythema) were read 24 h later by two experienced examinations and the results were expressed as the mean of the two readings. The variation between the two readings was less than 10%. Skin test responses larger than 5 mm were regarded as positive.

As seen in Table 3, injection of rRv3878 induced a marked Delayed Type Hypersensitivity 10 (DTH) reaction at the same level as after injection with PPD. rRv0284ct and rRv0285 resulted in a highly significant DTH reaction (P < 0.005; Tukey test). As expected, none of the antigens induced non-specific response in uninfected guinea pigs (Table 4).

Table 3. DTH erythema diameter (shown in mm) in guinea pigs aerosol infected with *M.* tuberculosis after stimulation with recombinant antigens.

Antigen ^a	Skin reaction (mm) ^b	SEM	
PBS	3.10	0.30	
PPD	13.10	, 1.18	
rRv0284ct	8.40	0.45	
rRv0285	7.00	1.08	
rRv3878	14.56	1.05	_

 $^{^{\}rm a}$ The recombinant antigens were tested in a concentration of 5 $\mu g,$ whereas 10 TU of PPD were used.

Table 4. DTH erythema diameter (shown in mm) in non-infected guinea pigs after stimulation with recombinant antigens.

Antigen ^a	Skin reaction (mm) ^b	SEM	
PBS	2.60	0.36	
PPD	3.00	0.44	
rRv0284ct	2.5	0.18	
rRv0285	3.45	0.74	
rRv3878	2.5	0.18	

 $^{^{8}}$ The recombinant antigens were tested in a concentration of 5 μg , whereas 10 TU of 25 PPD were used.

^b The skin reactions are measured in mm erythema 24 h after intradermal injection. The values are the mean of erythema diameter of five animals and the SEM are indicated. The values for rRv3878 are the mean of four animals.

^b The skin reactions are measured in mm erythema 24 h after intradermal injection. The values are the mean of erythema diameter of five animals and the SEM are indicated.

Claims

15

- A substantially pure polypeptide fragment which comprises an amino acid sequence as shown in SEQ ID NO: 2, SEQ ID NO: 4, SEQ ID NO: 6 or SEQ ID NO: 8 or comprises an amino acid sequence analogue having a sequence identity with any of said polypeptide sequences of at least 70% and at the same time being immunologically equivalent to said polypeptide sequence.
- A substantially pure polypeptide fragment which comprises a T-cell epitope of the
 polypeptide sequence as shown in SEQ ID NO: 2, SEQ ID NO: 4, SEQ ID NO: 6 or SEQ
 ID NO: 8 and at the same time being immunologically equivalent to said polypeptide.
 - 3. A fusion polypeptide comprising at least one polypeptide fragment according to any of the preceding claims and at least one fusion partner.
- 4. A fusion polypeptide according to claim 3, wherein the fusion partner is selected from the group consisting of a polypeptide fragment derived from a bacterium belonging to the tuberculosis complex, such as ESAT-6 or at least one T-cell epitope thereof, MPB64 or at least one T-cell epitope thereof, MPT64 or at least one T-cell epitope thereof, and MPB59 or at least one T-cell epitope thereof.
 - 5. A polypeptide according to any of the preceding claims which is lipidated so as to allow a self-adjuvating effect of the polypeptide.
- 25 6. A substantially pure polypeptide according to any of the preceding clams for use as a pharmaceutical.
- Use of a substantially pure polypeptide according to any of the preceding claims for the
 preparation of a pharmaceutical composition for the diagnosis of tuberculosis caused by
 Mycobacterium tuberculosis, Mycobacterium africanum or Mycobacterium bovis.
 - 8. Use of a substantially pure polypeptide according to any of the preceding claims for the preparation of a pharmaceutical composition for the vaccination against infections caused by *Mycobacterium tuberculosis*, *Mycobacterium africanum* or *Mycobacterium bovis*.

- 9. An immunologic composition comprising a polyp ptide according to any of the preceding claims.
- 5 10. An immunologic composition, which is in the form of a vaccine.
 - 11. An immunologic composition, which is in the form of a skin test reagent.
 - 12. A nucleic acid fragment in isolated form which

10

- 1) comprises a nucleic acid sequence which encodes a polypeptide as defined in any of claims 1-5, or comprises a nucleic acid sequence complementary thereto; or
- has a length of at least 10 nucleotides and hybridizes readily under stringent
 hybridization conditions with a nucleic acid fragment which has a nucleotide sequence selected from

SEQ ID NO: 1 or a sequence complementary thereto,

SEQ ID NO: 3 or a sequence complementary thereto,

SEQ ID NO: 5 or a sequence complementary thereto, and

- 20 SEQ ID NO: 7 or a sequence complementary thereto.
 - A nucleic acid fragment according to claim 12, which is a DNA fragment.
 - 14. A nucleic acid fragment according to claim 12 or 13 for use as a pharmaceutical.

25

- 15. A vaccine comprising a nucleic acid fragment according to claim 12 or 13, the vaccine effecting *in vivo* expression of antigen by an animal, including a human being, to whom the vaccine has been administered, the amount of expressed antigen being effective to confer substantially increased resistance to infections with mycobacteria of the tuberculosis complex in an animal, including a human being
- 30 sis complex in an animal, including a human being.
 - 16. Use of a nucleic acid fragment according to claim 12 or 13 for the preparation of a pharmaceutical composition for the diagnosis of tuberculosis caused by *Mycobacterium tuberculosis*, *Mycobacterium africanum* or *Mycobacterium bovis*.

- 17. Use of a nucleic acid fragment according to claim 12 or 13 for the preparation of a pharmaceutical composition for the vaccination against tuberculosis caused by *Mycobacterium tuberculosis*, *Mycobacterium africanum* or *Mycobacterium bovis*.
- 18. A vaccine for immunizing an animal, including a human being, against tuberculosis caused by mycobacteria belonging to the tuberculosis complex, comprising as the effective component a non-pathogenic microorganism, wherein at least one copy of a DNA fragment comprising a DNA sequence encoding a polypeptide according to any of claims 1-5 has been incorporated into the genome of the microorganism in a manner allowing the microorganism to express and optionally secrete the polypeptide.
 - 19. A replicable expression vector which comprises a nucleic acid fragment according to claim 12 or 13.
- 15 20. A transformed cell harbouring at least one vector according to claim 19.
 - 21. A method for producing a polypeptide according to any of claims 1-5, comprising
- inserting a nucleic acid fragment according to claim 12 or 13 into a vector which is able to replicate in a host cell, introducing the resulting recombinant vector into the host cell, culturing the host cell in a culture medium under conditions sufficient to effect expression of the polypeptide, and recovering the polypeptide from the host cell or culture medium; or
- isolating the polypeptide from whole mycobacteria of the tuberculosis complex or from 25 lysates or fractions thereof; or
 - synthesizing the polypeptide by solid or liquid phase peptide synthesis.
- 22. A method of diagnosing tuberculosis caused by *Mycobacterium tuberculosis*,
 30 *Mycobacterium africanum* or *Mycobacterium bovis* in an animal, including a human being, comprising intradermally injecting, in the animal, a polypeptide according to any of claims
 1-5 or an immunologic composition according to claim 9, a positive skin response at the location of injection being indicative of the animal having tuberculosis, and a negative skin response at the location of injection being indicative of the animal not having tuberculosis.

23. A method for immunising an animal, including a human being, against tuberculosis caused by mycobacteria belonging to the tuberculosis complex, comprising administering to the animal the polypeptide according to any of claims 1-5, the immunologic composition according to claim 9, or the vaccine according to claim 18.

5

24. A monoclonal or polyclonal antibody, which is specifically reacting with a polypeptide according to any of claims 1-5 in an immuno assay, or a specific binding fragment of said antibody.

1

SEQUENCE LISTING

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Ser His Pro Asp Pro Thr Ala Leu Ala Ser Val Pro Gly Ser Arg Arg

432

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			Asp													10
			ccg Pro 20													96
			att Ile													144
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			acc Thr 100													336
			ggt Gly										,			375
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GI ~		400>	_	80-	D~~	- ומ	Ma+	ምኤ ~	C1	D	т	T1 -	C1	C1 =	n	
1			Asp	5					10		_		_	15	_	
Pro	Trp	Thr	Pro 20	Leu	He	Gly	Leu	Leu 25	Ala	Gln	Ala	Gly	Asp 30	Leu	Gly	

Leu	Arg	Val 35	Ile	Val	Thr	Gly	Arg 40	Ala	Thr	Gly	Ser	Ala 45	His	Leu	Leu	
Met	Thr 50	Ser	Pro	Leu	Leu	Arg 55	Arg	Phe	Asn	Asp	Leu 60	Gln	Ala	Thr	Thr	
Leu 65	Met	Leu	Ala	Gly	Asn 70	Pro	Ala	Asp	Ser	Gly 75	Lys	Ile	Arg	Gly	Glu 80	
	Phe	Ala	Arg	Leu 85		Ala	Gly	Arg	Ala 90		Leu	Leu	Thr	Asp 95	-	
Asp	Ser	Pro		-	Val	Gln	Leu			Pro	Leu	Val	Asp 110		Ala	
Ala	Val	Ser 115	100 Gly	Glu	Thr	Gln	Gln 120	105 Lys	Gly	Ser	Gln	Ser 125	,			
	<; <;	210> 211> 212> 213>	306 DNA	obact	teri	ım Tı	uber	culos	sis							
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ato		100>		ata	att	cca	a a a	aaa	cta	acc	aca.	acc	300	act	gcg	48
		Leu														40
	-	gcg Ala	_	Thr			_	-	-				_	-		96
		att Ile 35														144
		gcg Ala														192
		gaa Glu													ggc Gly 80	240
gaa Glu	tcc Ser	ggc Gly	gcc Ala	agc Ser 85	tac Tyr	ctg Leu	gcc Ala	ggt Gly	gat Asp 90	gcg Ala	gcc Ala	gcc Ala	gcc Ala	gct Ala 95	acg Thr	288
		gtc Val														306
<210> 6 <211> 102 <212> PRT <213> Mycobacterium Tuberculosis																
Met		100>		V = 1	Val	Pro	Gl.:	G1 v·	Lon	^ות	ል1 ኋ	አነ ~	Ser	11 ~	- ומ	

Met Thr Leu Arg Val Val Pro Glu Gly Leu Ala Ala Ala Ser Ala Ala

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1 Val	Glu	Ala	Leu	5 Thr	Ala	Ara	Leu	Ala	10 Ala	Ala	His	Ala	Ser	15 Ala	Ala	
			20					25					30	Ser		
		35					40					45		Val		
	50					55					60			Val		
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														Ala 15		
														atc Ile		96
														atg Met		144
														gcc Ala		192
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_			-		_			_	_	_	_		-	ttc Phe 95		288
														cag Gln		336
														acg Thr		384
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gtg Val 145	ccg Pro	caa Gln	ctc Leu	gtt Val	cag Gln 150	ctg Leu	gct Ala	ccg Pro	cac His	gcc Ala 155	gtt Val	cag Gln	atg Met	tcg Ser	caa Gln 160	480
										caa Gln						528
										atg Met						576
										gag Glu						624
										gtg Val						672
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Gln Leu Gly Glu Thr Ala Ala Glu Leu Ala Pro Arg Val Val Ala Thr Val Pro Gln Leu Val Gln Leu Ala Pro His Ala Val Gln Met Ser Gln Asn Ala Ser Pro Ile Ala Gln Thr Ile Ser Gln Thr Ala Gln Gln Ala Ala Gln Ser Ala Gln Gly Gly Ser Gly Pro Met Pro Ala Gln Leu Ala Ser Ala Glu Lys Pro Ala Thr Glu Gln Ala Glu Pro Val His Glu Val Thr Asn Asp Asp Gln Gly Asp Gln Gly Asp Val Gln Pro Ala Glu Val Val Ala Ala Arg Asp Glu Gly Ala Gly Ala Ser Pro Gly Gln Gln Pro Gly Gly Val Pro Ala Gln Ala Met Asp Thr Gly Ala Gly Ala Arg Pro Ala Ala Ser Pro Leu Ala Ala Pro Val Asp Pro Ser Thr Pro 260 265 Ala Pro Ser Thr Thr Thr Leu